# CALIFORNIA PUBLIC EMPLOYEES' RETIREMENT SYSTEM OFFICE OF LONG-TERM CARE NOTICE OF PRIVACY PRACTICES

Effective Date: April 2003

## WHY WE ASK FOR INFORMATION ABOUT YOU

The Information Practices Act of 1977 and the Federal Privacy Act require CalPERS to provide information describing how personal medical information may be used and disclosed and how an individual providing this information can access this information. The information requested is collected pursuant to the Government Code (Section 20000, et seq.) and will be used for administration of the Board's duties under the Public Employees' Long-Term Care Act. Submission of the requested information is voluntary. Failure to supply the information may result in the System being unable to perform its functions regarding your status. Portions of this information may be transferred to other governmental agencies (such as your employer), physicians, and insurance carriers, but only in strict accordance with current statutes regarding confidentiality.

You have the right to review your CalPERS membership file. For questions concerning your rights under the Information Practices Act of 1977, please contact the CalPERS Customer Contact Center at (888) CalPERS (225-7377).

#### **HOW WE USE YOUR SOCIAL SECURITY NUMBER**

Section 7(b) of the Privacy Act of 1974 (Public Law 93-579) requires that any federal, State, or local governmental agency which requests an individual to disclose a Social Security number shall inform that individual whether that disclosure is mandatory or voluntary, by which statutory or other authority such number is solicited, and what uses will be made of it.

The CalPERS Office of Long-Term Care requests Social Security numbers on a voluntary basis. However, it should be noted that due to the use of Social Security numbers by other agencies for identification purposes, CalPERS may be unable to verify eligibility for benefits without the Social Security number.

The CalPERS Long-Term Care Program uses Social Security numbers for the following purposes:

- pension deductions.
- payroll deduction for all public employees.
- billing of public employers for employee contributions.
- coordination of benefits among long-term care and other insurance plans.
- resolve member appeals/complaints/grievances.
- 1099 reporting to Treasury.

### HOW WE USE AND PROTECT MEDICAL INFORMATION ABOUT YOU

We understand that medical information about you and your health is personal and CalPERS is committed to protecting medical information about you which is in our possession. This notice applies to all of the records of your long-term care plan participation generated by CalPERS.

The remainder of this notice will tell you about the ways in which we may use and disclose medical information about you. We also describe your rights and certain obligations we have regarding the use and disclosure of medical information.

The Federal Health Insurance Portability and Accountability Act Privacy Regulations (Title 45, Code of Federal Regulations, sections 164.500, et seq.) require us to:

- make sure that medical information that identifies you is kept private;
- give you this notice of our legal duties and privacy practices with respect to medical information about you; and
- follow the terms of the notice that is currently in effect.

#### HOW WE MAY USE AND DISCLOSE MEDICAL INFORMATION ABOUT YOU

The following categories describe different ways that we use and disclose medical information. For each category of uses or disclosures we will explain what we mean and try to give some examples. Not every use or disclosure in a category will be listed. However, all of the ways we are permitted to use and disclose information will fall within one of the categories.

- For Long-Term Care Program Operations. We may use and disclose medical information about you for CalPERS long-term care benefit operations. These uses and disclosures are necessary to run the CalPERS Long-Term Care Program. For example, we may use and disclose medical information about you to confirm your eligibility and to enroll you in the Long-Term Care Program. We may also use and disclose medical information about you for the coordination of benefits, or to resolve an appeal, complaint or grievance. We may also combine medical information about many CalPERS long-term care enrollees to evaluate Program performance, to assist in premium setting, or for other long-term care program operations. In some cases, we may obtain medical information about you from a medical provider or third-party administrator. If the medical information received from others is part of our long-term care program operations, the uses and disclosures would be in accordance with this quideline.
- Long-Term Care Related Benefits and Services. We may use and disclose
  medical information to tell you about long-term care related benefits or services, such
  as treatment alternatives, disease management or wellness programs, that may be
  of interest to you.

- As Required By Law. We will disclose medical information about you when required to do so by federal, state or local law or regulation.
- To Avert a Serious Threat to Health or Safety. We may use and disclose medical
  information about you when necessary to prevent a serious threat to your health and
  safety or the health and safety of the public or another person. Any disclosure,
  however, would only be to someone able to help prevent the threat.

#### **SPECIAL SITUATIONS**

- Workers' Compensation. We may release medical information about you for workers' compensation or similar programs. These programs provide benefits for work-related injuries or illness.
- Health/Long-Term Care Oversight Activities. We may disclose medical
  information to a health oversight agency for activities authorized by law. These
  oversight activities include, for example, audits, investigations, inspections, and
  licensure. These activities are necessary for the government to monitor the
  health/long-term care system, government programs, and compliance with civil rights
  laws.
- Lawsuits and Disputes. If you are involved in a lawsuit or a dispute, we may
  disclose medical information about you in response to a court or administrative order.
  We may also disclose medical information about you in response to a subpoena,
  discovery request, or other lawful process by someone else involved in the dispute,
  but only if you have been given proper notice and an opportunity to object.
- Law Enforcement. We may release medical information if asked to do so by a law
  enforcement official in response to a court order, subpoena, warrant, summons or
  similar process.
- National Security and Intelligence Activities. We may release medical information about you to authorized federal officials for intelligence, counterintelligence, and other national security activities authorized by law.
- Protective Services for the President and Others. We may disclose medical
  information about you to authorized federal or state officials so they may provide
  protection to the President, other authorized persons or foreign heads of state or
  conduct special investigations.
- Inmates. If you are an inmate of a correctional institution or under the custody of a law enforcement official, we may release medical information about you to the correctional institution or law enforcement official. This release would be necessary (1) for the institution to provide you with long-term care; (2) to protect your health and safety or the health and safety of others; or (3) for the safety and security of the correctional institution.

# YOUR RIGHTS REGARDING MEDICAL INFORMATION ABOUT YOU

You have the following rights regarding medical information we maintain about you:

Right to Inspect and Copy. You have the right to inspect and copy protected
medical information about you that is maintained by the CalPERS Office of LongTerm Care. In most cases, this consists solely of information concerning your longterm care plan. It may also include information that you have provided to CalPERS
to assist with coordination of benefits or to resolve an appeal, complaint or
grievance.

To inspect and copy protected medical information about you that is maintained by the CalPERS Office of Long-Term Care, you must submit your request in writing to the CalPERS Long-Term Care Program at P.O. Box 5708, Hopkins, MN 55343-7010. If you request a copy of the information, we may charge a fee for the costs of copying, mailing or other supplies associated with your request.

We may deny your request to inspect and copy in certain very limited circumstances. If you are denied access to medical information, you may request that the denial be reviewed. A licensed health care professional chosen by CalPERS will review your request and the denial. The person conducting the review will not be the person who denied your request. We will comply with the outcome of the review.

 Right to Amend. If you feel that protected medical information we have about you is incorrect or incomplete, you may ask us to amend the information. You have the right to request an amendment for as long as the information is kept by or for the CalPERS Office of Long-Term Care.

To request an amendment, your request must be made in writing and submitted to the CalPERS Long-Term Care Program at P.O. Box 5708, Hopkins, MN 55343-7010. In addition, you must provide a reason that supports your request.

We may deny your request for an amendment if it is not in writing or does not include a reason to support the request. In addition, we may deny your request if you ask us to amend information that:

- Was not created by us, unless the person or entity that created the information is no longer available to make the amendment;
- Is not part of the medical information kept by or for CalPERS;
- Is not part of the information which you would be permitted to inspect and copy; or
- Is accurate and complete.
- **Right to an Accounting of Disclosures**. You have the right to request an "accounting of disclosures." This is a list of the disclosures we made of medical information about you.

To request this list or accounting of disclosures, you must submit your request in writing to the CalPERS Long-Term Care Program at P.O. Box 5708, Hopkins, MN 55343-7010. Your request must state a time period, which may not be longer than six years and may not include dates before April 14, 2003. Your request should indicate in what form you want the list (for example, on paper or electronically). The first list you request within a 12-month period will be free. For additional lists, we may charge you for the costs of providing the list. We will notify you of the costs involved and you may choose to withdraw or modify your request at that time before any costs are incurred.

 Right to Request Restrictions. You have the right to request a restriction or limitation on the medical information we use or disclose about you for long-term care operations. You also have the right to request a limit on the medical information we disclose about you to someone who is involved in your care or the payment for your care, like a family member or friend. For example, you could ask that we not use or disclose information about a surgery you had.

We are not required to agree to your request. If we do agree, we will comply with your request unless the information is needed to provide you emergency treatment.

To request restrictions, you must make your request in writing the CalPERS Long-Term Care Program at P.O. Box 5708, Hopkins, MN 55343-7010. In your request, you must tell us (1) what information you want to limit; (2) whether you want to limit our use, disclosure or both; and (3) to whom you want the limits to apply, for example, disclosures to your spouse.

• Right to Request Confidential Communications. You have the right to request that we communicate with you about medical matters in a certain way or at a certain location. For example, you can ask that we only contact you at work or by mail to a specific address.

To request confidential communications, you must make your request in writing to the CalPERS Long-Term Care Program at P.O. Box 5708, Hopkins, MN 55343-7010. We will not ask you the reason for your request. We will accommodate all reasonable requests. Your request must specify how or where you wish to be contacted.

• Right to a Paper Copy of This Notice. If you have accessed this notice via the Internet, you have a right to a paper copy of this notice. You may ask us to give you a copy of this notice at any time.

To obtain a paper copy of this notice contact Long-Term Care Group, Customer Service, at (800) 982-1775.

#### **CHANGES TO THIS NOTICE**

We reserve the right to change this notice. We reserve the right to make the revised or changed notice effective for medical information we already have about you as well as any information we receive in the future. We will post a copy of the current notice at CalPERS and on the CalPERS web site at <a href="https://www.calpers.ca.gov">www.calpers.ca.gov</a>. The notice will contain on the first page, in the top right-hand corner, the effective date.

## COMPLAINTS

If you believe your privacy rights have been violated, you may file a complaint with CalPERS or with the Secretary of the Department of Health and Human Services. To file a complaint with CalPERS, contact the CalPERS Long-Term Care Program at P.O. Box 5708, Hopkins, MN 55343-7010. All complaints must be submitted in writing.

You will not be retaliated against for filing a complaint.

# OTHER USES OF MEDICAL INFORMATION

Other uses and disclosures of medical information not covered by this notice or the laws that apply to us will be made only with your written permission. If you provide us permission to use or disclose medical information about you, you may revoke that permission, in writing, at any time. If you revoke your permission, we will no longer use or disclose medical information about you for the reasons covered by your written authorization. You understand that we are unable to take back any disclosures we have already made with your permission, and that we are required to retain our records of your participation in the CalPERS Long-Term Care Program.